

# Appendix

## Appendix A

### Data Cleaning Procedures

The data cleaning process involved several steps to ensure the datasets were ready for analysis:

#### 1. Handling Missing Values:

- o **ISTAT Data:** Missing values in healthcare expenditures were imputed using the median value of the available data.
- o **Ministry of Health Data:** Missing prevalence rates of Long COVID were interpolated based on nearby time points.
- o **OECD Data:** Missing economic indicators were filled using forward-fill and backward-fill methods.

#### 2. Normalization:

- o All monetary values were adjusted to 2024 euros using inflation rates provided by ISTAT.
- o Labor force participation rates were normalized to a scale of 0 to 1 for consistent analysis.

#### 3. Data Merging:

- o The datasets from ISTAT, Ministry of Health, OECD, and European Commission were merged based on common time indices (years).
- o Care was taken to align the fiscal years of different data sources to avoid temporal mismatches.

#### 4. Outlier Detection and Handling:

- o Outliers were detected using Z-scores. Data points with Z-scores greater than 3 were considered outliers and were handled by capping at the 99th percentile.

### Assumptions

1. **Pessimistic Scenario:** Assumes a 5% increase in Long COVID cases and a 2% increase in healthcare spending, indicating a severe scenario with minimal intervention.
2. **Neutral Scenario:** Assumes a 3% increase in Long COVID cases and a 1% increase in healthcare spending, reflecting a balanced approach.
3. **Optimistic Scenario:** Assumes a 1% increase in Long COVID cases and a 0.5% increase in healthcare spending, representing an effective intervention scenario.